

CERTIFICATE OF ELECTION FOR SPECIAL ELECTION

(Specify purpose of election)

To the _____ County Superintendent:

We, the undersigned trustees, certify that the taxpayers of School District No. _____ of _____ County, State of Montana, on _____ day of _____, 20____, voted on the following proposition:

Number of votes FOR: _____

Number of votes AGAINST: _____

| | |
|-----------------------------------|--------------------------------|
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |
| * _____ (Print Trustee's name) | _____ (Trustee's signature) |

The proposition was thereby _____ approved or _____ disapproved.

*Signatures of Trustees of _____ School District No. _____

DATED this _____ day of _____, 20_____.

Canvassed results must be published once in a newspaper that will give notice to the largest number of people of the district. Send the certificate to the entity ordering the election within 15 days of the election, [20-20-416](#), MCA.